

REPORT NO. _____

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THIS IS UNEVALUATED INFORMATION

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- A. At the age of 16, the youth reports to his Military Commissariat for a detailed pre-induction physical examination. The total examination takes about 35 minutes. It includes a vision test (on a standard wall chart as well as the use of booklets for color blindness); a hearing test (conducted by whispering from across the room); a throat examination; a dental examination; a heart examination (listening to the heart beat); an X-ray of the chest; and a reflex test (similar to the standard US reflex test).

Depending upon the outcome, the youth is judged acceptable or unacceptable. If unacceptable, he is issued a document attesting to that fact. One may be rejected for TB, a high degree of poor vision, a missing limb, extreme cases of flat feet, etc. One who is rejected from the military service by this pre-induction physical examination is called a "White Ticket Holder" (BYELO BILETWAK). If the candidate passes the examination, he is issued a document called "The Booklet of the Pre-Inductee" which contains biographical data and which will be used in connection with his pre-inductee training. He is also placed upon the rolls of the local draft-board.

Doctors from local clinics are used for these examinations, and generally one doctor is used for each special examination or test. Such pre-induction physicals are made approximately once a year thereafter for everyone at their local clinic to affirm or reclassify the findings of the initial examination. Examinees are taken in groups for these exams. A month or two before induction (twice a year), there is a final examination similar to the above for the recruits-to-be. The draft age is now 18, although the draftees are usually at least 18½ years old when called up.

At the draft center, the subject is merely processed and sent on to a military unit where once again he is subjected to a military examination. This exam is given by army doctors at the unit to which he reports. At periods of one year thereafter, a physical examination similar to those

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above is given. Other lesser physical examinations of general health are given every few months with at least a 60-day interval. No medical examination is given the soldier upon his discharge. The man's name returns on the register of his local draft-board and he isn't examined thereafter.

2. Q. In general, what does the peacetime medical service of the Soviet Army consist of? Is the medical service regarded as favorable by the Army personnel? Is service for officers considerably better than for enlisted men?

A. I never saw any Soviet soldier (enlisted man) with eyeglasses. If a man's eyesight is so bad that he needs glasses, then he isn't taken by the Army. Glasses may be worn by officers however, but they must buy them for themselves. Glasses can be purchased at the local Voentorg.

With respect to dental care, officers must pay for any artificial teeth they receive while enlisted men receive them free of charge providing the loss of teeth was a service-connected accident. If the loss of teeth was purely the fault of the individual soldier, then, if he wishes artificial teeth, he must pay for them himself. Every annual medical inspection includes a dental one also. It is left entirely up to the soldier whether or not he wishes to have any teeth removed which the examination showed to be bad. Novocain is normally given during the extraction of teeth.

Soviet military personnel prefer treatment at the military hospital over the care afforded them at civilian installations because the food is better, and better medicinal treatment is offered at the army dispensaries. Dependents of military personnel are permitted free care at hospitals. Medical care for officers is generally better than for enlisted men since more attention is given to the former group.

3. Q. Is the use of women in the medical service a desirable thing both from the point of view of treatment and service and of morale and morals?

A. The female personnel of the Army Medical Organization is highly respected throughout the military service. One reason for this is the fact that the medical branch is conducted much like a civilian establishment and the majority of nurses in wartime are on civilian status in peacetime and merely militarized on the outbreak of war.

Vrach is the Soviet term for a medical doctor, and this term indicates anyone who has completed his or her advanced medical education.

Doctor's assistants are called feldshers or nurses. Their work is that of preparing the patient for operations; however, they do no operating themselves. They hold instruments and do bandaging. This position requires a high school education and the personnel are mostly women.

A sanitarka may be considered a maid in that she cleans floors, makes beds, etc. On hospital trains, the sanitarka role is taken by one called a sandruzhinitsa.

Doctors are normally given the rank of senior lieutenants, captains, majors, and lieutenant colonels. Feldshers or nurses hold ranks from lieutenant to captain; however, once they leave the specialty of being feldshers for administrative work, they may go even higher.

4. Q. What is the organization and composition of Soviet Army hospital trains?

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A. There are two types of Soviet Army hospital trains; the San Letuchka a converted hospital freight train and the standard Soviet Army hospital train. The San Letuchka hospital train evacuates casualties from the Army to the army group hospitals. It is a regular freight train equipped with medical facilities and a complement of medical personnel. It is equipped with beds made by setting stretchers on pipe racks which are built into the freight car. When battle casualties are heavy empty supply trains returning to the Russian zone of interior are hastily converted to the San Letuchka type hospital train. The T/O of a San Letuchka is generally the same as the standard Soviet Army hospital train. It consists of:

- (a) Lt. Col as train commander
- (b) A political officer
- (c) An executive for technical facilities (zampokhoz)

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- (d) Three to five commissioned doctors
- (e) A chief of pharmacy (feldsher)
- (f) One nurse for every two to three cars (feldsher)
- (g) One orderly for each car (sanitarka)
- (h) Two to three cooks
- (i) Supply sergeant
- (j) Laundry facilities

The Soviet Army standard hospital train operates between army group hospitals and hospitals in the zone of interior. The facilities of the Soviet Army standard hospital train are complete and represent a virtual hospital on wheels. The medical personnel component is like that of the San Letuchka but is permanently assigned.

5. Q. What system would likely be employed in the event of a new war for the replacement of Soviet personnel killed or wounded in action?
- A. The normal method for obtaining replacements for casualties is "through channels". Company commanders prepare daily reports and submit them to battalion. These forms are called A Daily Accounting (Sutochnaya Vedomost). This form accounts for the actual personnel strength of the unit, as well as for weapons and animals. Battalion collects these reports and sends them on to the regiment. Every 10 days on the basis of these reports, the regiment draws up a consolidated report called Form Number 6/OP, Report on Military and Strength Condition (Doneseniye O Boyevom I Chaistennom Sostave), which gives the picture on replacements needed. This is sent on to higher headquarters, which in turn sends down the replacements. In peacetime this procedure is not followed or needed because of the Report on Mobilization which is already written.

Companies, battalions, and regiments on the line are never withdrawn from the battle individually regardless of the amount of casualties sustained -- with the one following exception. If the regimental flag which identifies the unit should fall into enemy hands, the regiment is withdrawn and disbanded. There are two reasons for this action. First, it is considered a great dishonor for a regiment to lose its standard to the enemy, and second, the removal is also done for security reasons. The members of any such disbanded regiment would be sent to other fighting units.

The Soviet rifle division is not considered as unfit for continuing in action until 67% casualties are sustained. At this point, it is sent to the rear and restored to normal T/O and returned to battle.

Replacements generally are fresh men, ie, new recruits with their basic training just completed. All recruits would be well trained before being sent to units as replacements.

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